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Appl. No.: 10/820,549
Communication Dated October 4, 2006
Reply to Notice of Allowance of August 14, 2006

DTG-105US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.: 10/820,549
Applicant: Steven R. Cosentino et al.
Filed: April 8, 2004
Title: TEAR RESISTANT BAG FOR CONSUMABLES
TC/A.U.: 1771
Examiner: Lynda Salvatore
Confirmation No.: 8365
Docket No.: DTG-105US

COMMENTS ON EXAMINER'S REASONS FOR ALLOWANCE

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In the Notice of Allowance dated August 14, 2006, the Examiner identified specific features of the claims in the Examiner's Statement of Reasons for Allowance. Applicants' submit that their invention is defined by the entirety of each claim and not just by the specific features recited in the Reasons for Allowance.

Respectfully submitted,

Frank P. Tise, Reg. No. 50,379
Agent for Applicants

FPT/gdb

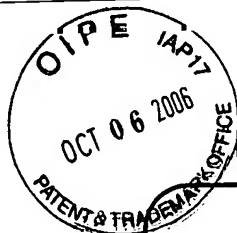
Dated: October 4, 2006

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Gayle D. Bay



TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/820,549
	Filing Date	April 8, 2004
	First Named Inventor	Steven R. Cosentino et al.
	Art Unit	1771
	Examiner Name	Lynda Salvatore
Total Number of Pages in This Submission	Attorney Docket No.	DTG-105US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input checked="" type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
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SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Firm Name	RatnerPrestia		
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Printed Name	Frank P. Tise		
Date	October 4, 2006	Registration No.	50,379

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Typed or Printed Name	Gayle D. Bay	Date	October 4, 2006

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